



# **CONSUMER BEHAVIOUR FOR CONTRACEPTIVES**

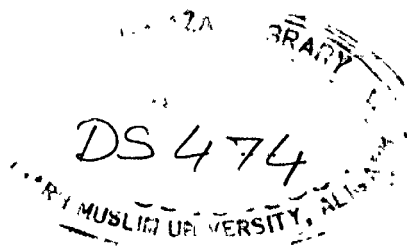
**—an analytical Study**

**DISSERTATION SUBMITTED  
IN PARTIAL FULFILMENT OF THE REQUIREMENTS  
FOR THE AWARD OF THE DEGREE OF  
MASTER OF BUSINESS ADMINISTRATION**

**BY  
BHUVAN MITTAL**

**Under the Supervision of  
Mr. Kaleem Mohd. Khan**

**DEPARTMENT OF BUSINESS ADMINISTRATION  
ALIGARH MUSLIM UNIVERSITY  
ALIGARH  
1982**



DS474

K.M.Khan,  
Lecturer



DEPTT. OF BUSINESS ADMINISTRATION  
ALIGARH MUSLIM UNIVERSITY  
ALIGARH (INDIA)

Dated. 23.12.1982

Certified that Mr. Bhuvan Mittal student  
of M.B.A. Final has completed his dissertation  
entitled "CONSUMER BEHAVIOUR FOR CONTRACEPTIVES-  
AN ANALYTICAL STUDY" UNDER MY SUPERVISION.

I am satisfied that the work is based on the  
investigations made and data collected by him.

*Kaleem Mohd. Khan*  
(Kaleem Mohd. Khan)  
Supervisor

## A C K N O W L E D G E M E N T

He has been so much to me - not merely my guide or Supervisor. He is a source of inspiration to me. His guidance and personal interest in my work encouraged me to withstand all the difficulties and strains that I confronted during my dissertation.

Well, giving me his permission to work on a controversial and debatable topic like "Consumer Behaviour for contraceptives - Analytical study" reflects his forward looking attitude. Besides this, his frank and straight forward views regarding this topic helped me to develop my work in a systematic style. I for once never imagined if I could be so compatible with him and I really feel proud to state that during this span I came to know him in person, as a Professor and above all my guide. Therefore I owe my credit to him and he is - Mr. KALEEM MOHD KHAN.

Dated : Dec.21, 1982

  
BHUVAN MITTAL

## C O N T E N T S

Page No.

Preface .....	.....	i
	<u>Chapter-1</u>	
INTRODUCTION :	.....	1-5
	<u>Chapter-2</u>	
CONCEPT AND PROMOTION:.....	.....	6-31
CONTRIBUTORS		
	<u>Chapter-3</u>	
SERVER DESIGN :	.....	32-40
	<u>Chapter-4</u>	
ANALYSIS :	.....	41-52
	<u>Chapter-5</u>	
CONCLUSIONS :	.....	83-93
	Appendices	
QUESTIONNAIRE	.....	94-100

## P R E F A C E

How much has been spoken of family planning through the use of contraceptives. How much has been said about the importance of contraceptive as a measure to hold the population explosion. Yet, the consumption rate remains deplorably low. However it is note worthy that the awareness about the product is steadily increasing. Management people until a little before had left this problem to be singly shouldered by the government of India. However now management sciences are looking hard on promulgations and implementations of schemes and programmes to promote the sales and use of contraceptives. For my dissertation work I took this topic not only as a choice but as a challenge.

There came times during my survey, when my patience and ability were put to difficult tests and for a moment I felt shaken, when I had to confront some very conventional and orthodox people who were very much inhibited and to a measurable extent festidious in their views about the use of contraceptives as a method of managing and planning a family. It was not very easy to extract the truth from such a diverse group. Yet, I feel that my confidence remained undeterred and I could draw out the essential for my thesis work.

Both, demographic and social reformers believe that the growth of population must be minimized and I feel that this can be done by introducing the concept of contraceptives

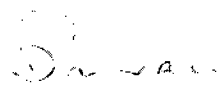
to the forefront. This does not even require the curtailing of the fertility period.

In a dynamic Environment the marketing strategy of a firm is influenced by different classes of consumers that constitute the market of the product. The market of contraceptives is probably the largest after food, clothing and shelter. It is universal and worldwide. Thus it is of utmost importance that the needs and desires and preferences of these consumers must be carefully analysed, if the firm wants to survive and serve the society in the best possible way.

Consumer behaviour is influenced by many factors at different stages of life. Younger set is influenced by glamour and ostensity of the product while mature people go in for attributes.

The present study has taken age, sex, educational qualifications, profession and place of residing as the major variables for analysis. It is my service to the people and they are indisputably the best judges to decide as to how much I have really been able to draw out from them in a bid to serve them.

I extend my appreciation for all those who have assisted me in completing my thesis.

  
BHUVAN MITTAL

---

## CHAPTER - I

---

### INTRODUCTION

- (1) Consumer's and their behaviour
- (2) Buying process
- (3) Classification of Needs
- (4) Consumer's Behaviour and brand preferences



## INTRODUCTION

Consumer Market involves all individuals and households who buy or acquire goods & services for personal consumption . Consumers vary tremendously in their ages, incomes, educational levels, mobility patterns & tastes. This is there fore worthwhile to distinguish different groups and develop products and services tailored to their particular needs. When the market segments are large and universal as in the case of contraceptives special marketing programmes must be setup to serve their purpose. Contraceptives are generally non durable goods and are consumed fast and purchased frequently. The occasions for consumers buying can be along several dimensions,there fore consumption rate seasonal factors, time and economic conditions could be a few plausible factors that decide when a purchase must be made. The consumer market buys products & services to satisfy varieties of needs - physiological, social, psychological satisfaction and spiritual needs. Contraceptives are purchased for satisfaction of physiological needs i.e. sex basically. The economic, Actional and Social interests are however also demanding the use of this products. Therefore the orientation of market as a pre-requisite for a successful marketing effort & this must primarily enclose with in its purview the needs, wants & desires of the consumers.

Marketing orientation involves consumers research which deals with the measurement, evaluation & interpretation

of wants, attitudes behaviour and preferences of different segments of a target market. Thus consumers determine what exactly a business is and how production should be maintained. Thus it is important that consumers attitude towards a product should be studied to have a viable & purposeful marketing strategy. Consumer is A Human force governed by emotions and desires and this ultimately involves purchase and consumptions.

Consumers are a Heterogenous mass where each factor has a unique set of inherent desires & priorities for their fulfillment. Every consumer assigns some value to different attributes of a product. Accordingly a preference is made from a group of similar products. The one which is chosen becomes a "Satisfier" while the others are rated as "Substitutes". Internal motivating forces which initiate the purchase and the learning process governing the decision to buy a specific product must be given due acknowledgement while studying consumer behaviour.

Behaviour is a result of tension induced by a drive motive or aspiration. This enforces an individual to render attention to the product or messages about those products. Cues predict that possession of the product will relieve the tension. If the response is rewarded the response might be repeated again if similar tension reoccurs and this may lead to formation of habit and its reinforcement. Thus attitude envelops three facets (1) exposure (2) attention (3) retention.

### BUYING PROCESS

It involves five steps

- (1) Need arousal :- Need could be activated through internal or external stimuli. When a person's normal need say sex rises to a threshold level and becomes a drive, he is motivated towards the object that will satisfy this drive.
- (2) Information Search :- When the aroused need is intense and a well defined gratification object is near at hand the person is likely to gratify the need right then. A married couple may desire to have a proper spacing in their child birth and they may be aware that there might be a product which could assist them in their efforts i.e. contraceptive. This information search involves two steps (a) heightened attention i.e. individual becomes alert to information bearing on the need & its gratification (b) information search. The person needs more information about the key attributes of the product class, about the qualities of the various brands and the outlets at which they are available.
- (3) Evaluation Behaviour :- The incoming information helps the consumer to clarify and evaluate the alternatives. The marketer should know how consumers process their information to arrive at product judgements. This involves the concept of product attributes. In case of contraceptives the attributes considered are reliability, fineness, colour, ease, durability and skin etc. These attributes determine the utility function of the product.

(4) Purchase Decision :- This is based on the above factors and depends upon the influence on the buyers mind.

(5) Post Purchase Feeling :- After buying and trying the product the consumers experience some level of satisfaction or dissatisfaction, the difference between the expectations from the product in the buyers mind and the products perceived performance is a measure of an individual's post purchase feeling.

#### MASLOW'S SYSTEM OF NEEDS

It ranks the various types of Human needs in order of hierarchy. He could illustrate his classification as follows.

##### PHYSICAL NEEDS

(1) Physiological needs :- The fundamentals of survival of human beings including sex, hunger, thirst.

(2) Safety :- Concern over physical survival, ordinary prudence which might be overlooked in striving to satisfy sex, hunger etc.

##### SOCIAL NEEDS

(3) belongingness and love :- Striving to be accepted by the intimate members of one's family and to be an important person in them, this striving could also include a desire to work for the good of the community.

- (4) esteem & status :- Striving to achieve high standing in relations to others including desire for mastery, reputation and prestige.

#### SELF NEEDS

- (5) self actualization :- A desire to develop a personal system of values leading to self realization.

#### CONSUMER BEHAVIOUR AND BRAND PREFERENCES

The Behaviour of a particular consumer to the product class is different from that towards a particular brand. Out of the total consumers, who use or purchase certain product class, certain percentage of them give preference to a certain brand then the rest of brands. The factors or variables which are responsible for brand preferences are both internal and external. Internal factors emanate from the personality of a consumer and external factors are the brand attributes which the consumer perceives present in particular brand.

1,

## CHAPTER - II

- (1) General concept about contraceptives.
  - A. Types of contraceptives and their uses.
  - B. Advantages and disadvantages of contraceptives.
  
- (2) Management of family planning programme through promotion of contraceptives - a commercial outlook.
  - A. Launching contraceptives project.
  - B. Desk research.
  - C. Client's brief.
  - D. Review of contraceptives marketing.
  - E. Communication strategy.
  - F. Concept development.
  - G. Media - types and expenditure.

GENERAL CONCEPT ABOUT CONTRACEPTIVES - TYPES, USES, ADVANTAGES  
AND DISADVANTAGES

CONTRACEPTIVES METHODS:-

The contraceptive technology is of crucial importance in spreading Family Planning . There are several methods, some require sustained motivation and repetitive action and others donot. The methods must meet the criteria of safty, effectiveness, acceptability and inexpensiveness. It must be kept in mind that no single method is likely to meet social, cultural, aesthetics and service needs of all individuals and communities. Thus my present approach is to offer all methods from which individual can choose according to his needs and wishes. Preference should be given to methods with high degree of use effectiveness. The term "conventional contraceptive" is used to denote those methods that require action at the time of sexual intercourse i.e. condoms, foam teblets, Jellies etc. The success of any contraceptive method depends upon not only preventing pregnancy but on the rate of continuance of its use. The methods of contraception may be conveniently grouped as follows.

TEMPORARY METHODS

(A) BEHAVIOURAL

- (1) Abstinence
- (2) Coitus Interruptus
- (3) Safe periods

(B) CHEMICAL

- (1) Foam Tablets
- (2) Jellies and pastes

(C) MECHANICAL

- (1) Condoms
- (2) Diaphragms and cervical caps
- (3) I.U.C.D.

(D) COMBINED

- (1) Mechanical & (2) Chemical

(E) PHYSIOLOGICAL OR ORAL

- (1) Combined pill
- (2) Sequential pill
- (3) Micro pill

(F) ABORTIONS AND SURGICAL METHOD

(G) STERILIZATION OR PERMANENT METHODS

- (1) Vasectomy
- (2) Tubectomy

BEHAVIOURAL METHODS

Abstinence :- Sound in theory but difficult in practice amounts to repression of natural force and is liable to manifest it self in other directions such as temperamental changes and nervous breakdowns. Not a advisable method.



**Coitus interruptus :-** Widely practised. Semen is not allowed ~~to~~ be discharged into the vaginal canal of the female. Drawback of this method is that precoital secretion of the male may contain sperm which if deposited might result in pregnancy. Further, slight mistake in timing the withdrawal may lead to deposition of semen and even a drop of it is sufficient to cause pregnancy. Failure rate is as high as 75%.

**SAFE PERIODS :-** A week before and a week after the menses as called the safe period. This is Omnibus rule. (1) Ovulation occurs on 14th day of menstrual cycle. Life of ovum is not more than 2 days and hence conception as possible only during this week. (2) life of sperm is also not more than days thus if risky days are avoided chances of pregnancy are reduced by 80%. Drawbacks of this method are (1) compulsory abstinence of sexual activity for nearly half of every month. (2) some females may suffer from irregular cycle. (3) not advisable in postnatal period.

#### CHEMICAL METHODS

**Foam tablets :-** These provide a physical barrier to the sperm through foam and partly by spermicidal action. The spermicidal agent is phenyl mercuric acetate. It is introduced deep into the vagina 10-15 minutes before the intercourse, 1-2 tablets moistened with clean water.

Advantages :- (1) It is cheap, safe & harmless.  
 (2) easy to use. (3) If combined with condom success is 90%.

Disadvantages :- (1) Tablets may not be dissolved properly.  
 (2) may cause irritation & burning. (3) if left in open they get spoilt. Some tablets manufactured under different name are (1) contab (2) plantab, (3) volpar, (4) tibtab

Jellies pastes & creams :- applied just before intercourse a special applicator is used at body temperature. Usually combined with mechanical devices for definite success. Only complain is that the person may complain of messiness. Preparations are sold under various trade names. (1) proceptin (2) volparpaste (3) coopers cream etc.

#### MECHANICAL METHODS

Condoms :- is probably the most widely used method by males. It is made of synthetic methodical rubber or latex. Contom sold in India are teatended consumers in Europe & U.S. prefer plain ended variety. More recently plastic condoms (polulation council of New York) It is provided with a metal rim base to retain it during coitus Hindustan latex limited is working on lubricated condoms & many newtypes have been introduced.

Use and Care :- No need for individuals retesting. Because modern methods of manufacture are used. should be used once if cost is not a consideration. Used in conjunction with a spermicide leads to more effectiveness & reliability.

advantages :- (1) easy to use (2) cheap (3) reliable and harmless (4) protects against pregnancy and venereal diseases (5) no side effects.

disadvantages :- (1) may burst or slips or tear during use (2) interferes with sex sensation locally of which some complain while others get used to it use effectiveness. Failure rate 10-14% per 100. available under various trade names.

(1) Durex (2) Durapic (3) goldcoin (4) three kings (5) korinoor - T.T.K.Product (6) Tahiti - marketed by dolly exports Pvt. Ltd., (7) share. Some of these are available free of charge in F.P. clinics and primary health centres and sub centres at very low price.

Diaphragm and Cervical caps :- methods and appliances for females which form a barrier to the entrance of sperm into the cervical canal. may be of (1) dutch cap type (2) cervical cap (3) vault cap (4) vinulo cap (5) I.U.C.D. ( ) Loops

Advantages :- (1) Simplicity in insertion (2) insertion takes a few minutes (3) no loss of time for the individual (4) in expensive, costs very little. (5) reversible method. (6) may remain in uterus for years without harming.

Contraindications :- Not to be used during (1) pregnancy (2) pelvic infection (3) immediately after abortion (4) distortion in uterus. (5) profuse bleeding (6) cancer or suspicion of malignancy (7) unmotivated persons.

Side effects :- (1) Bleeding (2) Pain, acute some times.  
 (3) Vaginal discharge (4) may get perforated (5) may less-  
 en fertility.

Oral contraceptives :-

Some tablets for females and the Companies produ-  
 cing them.

Name	Company
Minovlar	M/s German Remedies Pvt. Ltd.,
Norlestrin	M/s Parke Davis
Ovuler	M/s Searle India Ltd.,
Primovlar	M/s Schering Asia
Ovral	M/s Wyeth labs.

Tablets for males are being tried and research is  
 in full progress in European countries. Oral contraceptives  
 are of 3 types. (1) combined pill. (2) sequential pill  
 (3) Micropill. these inhibit ovulation by blocking release  
 of lutenising hormone. A knowledge of menstrual cycle is  
 necessary for use of O.C. M. cycle begins when menstruation  
 is set into motion by pitutary. The cycle consist of 3 phases.  
 (1) Menstrual phase (2) proliferated phase (3) progesta-  
 tional phase. The mens<sup>r</sup>tual phase lasts for 1 to 4 - 5 days.  
 prolifer-ative phase begins on 5th or 6th day of the cycle  
 and goes upto 14 day i.e. time of ovulation. It prepares ute-

rus to recieve ovum. The progestational phase begins on 28th days of M.Cycle.

Side effects :- (1) break through bleeding - may cause fear,pain and depression (2) faliure of withdrawl of bleeding (3) lactation - should not begin to mothers feeding infants. (4) Bressr tenderness is effected. (5) weight gain (6) Nausea (7) Hypertension in exeptional cases (8) May cause Jaundice (9) Psychological disturbanc-es.

Useful effects :- (1) It gives relief of premenstrual tension. (2) General feeling of well being. (3) relief of acne.

#### FAILURE RATES WITH VARIOUS CONTRACEPTIVE METHODS

	Method	Failure Rates
1.	Condoms	10.14 %
2.	Diaphragm	12.15 %
3.	I.U.C.D.	2.40 %
4.	Oral pills	0.00 %

MANAGEMENT OF FAMILY PLANNING PROGRAMMES  
THROUGH PROMOTION OF CONTRACEPTIVES -  
A COMMERCIAL OUTLOOK

Why can't you sell contraceptives in India like you sell tea, soap and cigarettes. It was probably a question such as this that led to the origin of family planning project (Reference Nirodh and other condoms) of the Government of India. Posed in this manner the question really asked one to reconsider traditional ways of promoting family planning and seek break through in the following areas.

- (1) To overcome all reticence on the subject of birth control and give it a social legitimacy.
- (2) To make such devices easily available to every user rather than entail a journey to the family planning clinic.
- (3) To accomplish virtually nation wide depth of distribution.
- (4) To price the devices at a very low level and make the user perceive it as a every day necessity like soap or tea.

It was in 1964 that professor Peter S. King with the help of a committee of experts prepared a proposal to apply in a truly unique manner a marketing approach to the promotion of family planning. A detailed document

was compiled and presented to the Govt. of India. This document conceived of Nirodh, Cu-T, loops and other condoms etc. as terminal device for limiting family size rather than spacing children. Committee suggested several brand names for condoms and contraceptives including nirodh. The package should also bear a symbol which virtually represents the image. One possibility may be simple line drawing showing the figure of man and women holding the hands of their 3 children.

The most significant recommendation of the committee was that Govt. of India should enter into a agreement with consumers good manufacturing companies which already had wide spread distribution net works. Since to reach the poorest couples of the country it should have lowest retail price as possible. This pricing would require some amount of subsidy from the Govt., the distributing companies would therefore have to work on very small margins. However the committee felt that an appeal to such companies to participate in the venture not from motives of profit but social service might well succeed. In addition the report covered a whole range of decisions that would have to be taken on matters such as (1) Definition of the target group. (2) Assessment of consumer behaviour and attitude. (3) Marketing strategy. (4) Product and pricing policies. (5) Distribution. (6) Advertising and promotion.

Govt. of India studied this document and decided to impliment this scheme. Commercial family planning programme was launched in Sept., 1968. The combined resources of the distributing companies provided a highly effective net work with the potential of reaching condoms to 400000 retail outlets. However the launch was restricted to 100000 outlets and the later objective was 250000 outlets. The companies also provided marketing management scale. They work together with the Govt. to developed trade incentives and sales promotion programmes to ensure that the distribution net work was motivated and constantly activated towards increasing the level of sales, this they do through their management staff and field organisations of many hundred salesman.

From the very outset Govt. of India realised that aside from providing distribution net work designed to set up an effective flow of condoms to retail outlets, the development of mass market for Nirodh would require special efforts in the area of consumer motivation.

#### CONDOMS PROJECT LAUNCHED:-

For initial launch one of the distributing companies engaged its own advertising agency. It is significant that for initial launch creative strategy for condoms was based on idea of limiting family size. However the copy talked to readers in terms of proper national interests and problems.



INTEGRATED APPROACH:- Soon after the launch of condoms as a commercial activity several important steps are taken. (1) Appointment of marketing executive by Govt. (2) The Ford foundation offered two consultants to the marketing executive, one for marketing strategy and other for advertising strategy both these consultants were drawn from commercial firms in the country. (3) It is also decided to engage a professional advertising agency to develop and promote integrated communication programme for contraceptives. After examining the project reports submitted by no. of agencies help to prepare creative material and media plan.

DESK RESEARCH:- Selected agency personnel read and extract a no. of datas from publications on the subject of family planning. They work hard and their key findings of desk study may be summarised as follows: (a) F.P. awareness is certainly rising as a result of massive service and promotional programmes under taken by the Govt. (2) F.P. approval was also rising and there were no strong religious or social forces against F.P. (3) F.P. practice in fact is distressingly low, increase in rate of adoption is nowhere near as encouraging as the increase in rate of awareness.

The agency team then considers the hypothesis "could it be that this gap is due to inaccurate understanding of F.P." One of the reasons for this hypothesis was that, from the material studies a fairly strong and definite image is emerging. "That to most people F.P. means

termination of birth". This emage appears to be the result of two factors. (1) Apart from supporting specific methods such as loops, cu-T, condoms etc. Govt. of India's F.P. campaign had been projecting very small family norm message, "two or three children are enough". Agency makes a assumption that there is a strong association of F.P. with surgical methods. Which has created a degree of fear, this association is a result of earlier emphases in the F.P. Programme on the clinical and surgical methods such as sterilization and loops etc. The concept of "Spacing as a part of F.P. also appears to be overshadowed by the terminal emage of F.P. Agency feels the need to create not only distinguishable emage for nirodh as a product unlike other clinical products, but also a need to establish basic concept of spacing as a form of F.P.

CLIENT'S BRIEF:- Interpretation of desk research calls for a basic decision by Govt. of India. This is to present condoms and all other types of contraceptives not in context to limiting family size as up to that time but as spacing devices aimed at younger and recently married couples the briefing document must say - (1) contraceptives should be of particular interest to younger age groups whose immediate need is to space children ..... Those who have used contraceptives for spacing can be expected to be easily motivated to go in for a permanent method after they have had two children.

REVIEW OF CONTRACEPTIVE MARKETING:- A look at the progress achieved through commercial distribution during the previous

is as follows:

(1) There is a high launch sale followed by poor consumer off take and low repeat sales. (2) Revival in contraceptive sales reflected extension of coverage. (3) On an average 25 million condoms are being sold per month.

ONE YEAR EXPERIENCE:- Some recent studies summarise experience of marketing contraceptive for one year ~~is~~ as follows: (1) Commercial distribution of contraceptives has helped to nearly tripled the no. of contraceptive acceptors. (2) Despite resistance and prejudices mass distribution and display on scale never visualized before has become possible within a short time. (3) Width and height of distribution are satisfactory and have significantly improved contraceptives availability for potential users. (4) There is a urgent need to raise the sales through a powerful advertising campaign, if the present efficiency of the distribution net work is to be maintained.

ECONOMIES OF CONTRACEPTIVES DISTRIBUTION:- Though distribution margins were very low the trade has responded, thanks to the efforts of various distribution companies.

COMMUNICATION STRATEGY:- In formulating the communication strategy for contraceptives several factors have to be considered. (1) Need to give adequate information regarding contraceptives. Communication should have a strong educational

content and should be through learning size and retention size packages to permit easy repetition by word of mouth. This suggest heavy use of mass media giving simple messages at high frequency. Every additional child birth adds significantly to those inclined to practice. This is most noticeable after the first child for a couple. Therefore the birth of first child is most suitable moment to think of contraceptives and take action. One of the most powerful motives to which Indian couples will respond is the welfare of their children. This should be the dominant theme rather than hedonistic appeals of great personal comfort and extreme ease in performing.

RETAILERS:- They deal with average monthly consumer off take in a test area and no. of outlets required to maintain distribution.

WHOLESELLERS:- The work on average no. of outlets served and total consumer sales in unit per month. Wholesellers have their own gross margins. Gross margins vary per outlet served.

DISTRIBUTION COMPANIES:- They work for distribution and deal with delivery investment, warehousing and they maintain a record

The target group was defined as couples in middle and lower income groups of both urban and rural areas with prime emphasis on couples recently married. The communication objectives for contraceptives campaign would be summarized as follows:

- (1) To motivate the target group to use contraceptives for various reasons particularly for spacing children.
- (2) To make the use of contraceptives more respectable and remove inhibitions and shyness about the product.
- (3) To inform the target group that different types of contraceptives of excellent quality are existing such as condoms, cu.T., Cu-7, loops, tablets etc. These are reliable and comfortable to use and they do not effect sensations.
- (4) To inform the target group by generating word of mouth publicity by satisfied users.
- (5) To inform the target group that contraceptives are convenient, reliable and suitable methods for F.P.

GROUP DISCUSSIONS AND FIELD STUDIES:- These programmes can reveal data about the effectiveness of F.P. communications. Agency can undertake a series of group discussions to assess how people react to family planning messages and their motivation and attitudes towards spacing in particular and F.P. in general. In promotion of contraceptives as a measure for F.P. especially spacing methods of F.P. It is important to build benefits which were closely related to personal aspiration and desires of one self and one's family. Having from the group discussions informations on desires and aspirations and areas of concern regarding F.P. and spacing. It is than possible to structure of formal questionnaire which included the most relevant aspects. This questionnaire is tested amongst small no. of respondents to ensure that it is practical and managable. It was than translated to various languages, several centres are covered. Final list of towns

that are randomly selected is drawn up to represent different types of cities and towns in India. The results of this field operation could reveal amongst other things the following.

- (1) The multiple meaning of family planning
- (2) To some it is a small family.
- (3) To some it is having children to plan.
- (4) To some it is termination of births.

The concept of management of family" appears to have good degree of approval but when probed through different kinds of questions acceptance of small family as a way of life was not high". The desire for more sons, the fear of infant mortality and the needs to provide some of the inhibiting factors which appeared to prevent people from acceptance of small family norm as a way of life for themselves. They however were almost unanimous in accepting and approving of its desirable concept. An important point that needs emphasis is that nearly half of the respondents associated with family planning concept relate it with termination of child birth. These responses appear to validate the earlier desk research assumption. This image of termination strongly reflected in the answer to the question - "When should one adopt family planning"? The majority of replies say - When a person does not want to have any more children.

In the data collected on reasons as to why people would

practice family planning the motivating factors and response pattern is as follows.

UNAIDED REASON:- Following are the statements and views express by the respondents to an open question and reflects strongly the "top of mind" attitudes that they have towards the subjects.

- (1) Small family - Happy family.
- (2) Economic benifits.
- (3) Health factors.

Each respondent is given a card on which various reasons were listed and they were asked to selecte from the list those factors which would be important in motivating somebody to adopt F.P. The responses received should be classified as aided reasons.

AIDED REASONS:- These could be

- (1) Economic benifits to educational expressions.
- (2) Literacy level.
- (3) Health factors.

Approval of elders and national interest is a important motivating factors. These results further reinforce the earlier assumption that people practice family planning for personal benifits.

Information is obtained on inhibiting factors or reasons why people are not practicing family planning through use of contraceptives. The measured responses to this part of the study are:

- (1) LACK OF AWARENESS AND KNOWLEDGE OF F.P.:- THE Methods people are ignorant of different types of contraceptives available.
- (2) Desire for more children more specifically sons.
- (3) Fear of F.P. and health hazards that might arise from adoption of contraceptives.
- (4) Sexual activity is hindered and loss of vital pleasure - Impotency in later stages in case of males.
- (5) Females sexual desires are curbed and fear of after effects
- (6) Psychological concept.

SPACING:- Since contraceptives are primarily a product that would provide users with ability to practice spacing. A <sup>a</sup>separate section of work was designed to obtain data on spacing. The results of this were:

- (1) Awareness of spacing ranged from fair to high with majority of respondents having only fair degree of awareness for spacing.
- (2) Approval of spacing has almost being uniformly high - this approval rating was obtained after explaining what was meant by the term spacing.



It is interesting that both awareness and approval were highest amongst those with higher education and income. It needs to be given attention.

Information on major reasons for approving the spacing concept are

- (1) Health of ~~child~~ and mother.
- (2) Better education and care of the child.

Again it is clear that the ~~benefits~~ of spacing were perceived in personal terms and closely related with the family unit in this case with child and the mother.

CONCEPT DEVELOPMENT:- This is probably the most crucial stage of work on contraceptives campaign. It is at this stage that the final decision have to be taken regarding product position, The creative brief and advertising strategy. This debate could include questions such as:

- (1) Should contraceptives be emphasised for family limitation the quickest demographic impact could be expected from stopping higher order of birth and hence ~~we~~ not promote (as a F.P. method). Contraceptives as simple clinical on nonclinical, mechanical, oral, chemical etc. methods of limitation.
- (2) Should contraceptives be promoted to newly married couples as well or should one concentrate only on couples with one or two children.
- (3) Could the enjoyment of married life without the burden

of children too early to be used as motivation. (Park davis)

Bearing in mind the informations collected on aspirations and motivations the agency should develop the brief for creative group. The creative brief should be summarized as:

Exploit the desire of parents to give their children the best start in life so as to make them accept the concept of spacing and in this way lead them to adoption of use of contraceptives.

The message should be especially relevant to the younger couples who form a large and important group for the countries population. Eventually two alternative creative approaches can be developed by the agency and both of these appear to meet the requirements of creative briefs. It is felt that before making a decision as to which one of these should be used, it is useful to pretest message carrying ability of the two series.

ADVERTISING PRE-TEST:- It is conducted in few cities and towns during a particular time period. The respondents are divided into four groups :

- (1) Middle class males and females with one or two children.
- (2) Middle class males and females with three children.
- (3) Working class males and females with two to three children.
- (4) Males and females with more than three children.

One half of the respondents in each group are shown the first series and the other the second series to obtain their individual reaction to a set of advertisements. The procedure of getting a same individual to react to two sets of advertisements is sometimes followed but in this case it is felt that it would not provide the kind of measurement that was necessary. Two sets of respondents are matched in certain demographic characteristics to ensure that the same kind of people were responding to two different stimuli's.

The advertisements tested are the following :

(A) Think series:-

- (1) Featuring a mother and child.
- (2) Featuring a father and child.
- (3) Featuring a family.

(B) Now that you are parents series:-

- (1) Featuring a mother and child.
- (2) Featuring a father and child.
- (3) Featuring the children only.

Next stage is to assess to what extent respondents that the messages were important and to what degree they found them credible, persuasive and easy to comprehend. On all these dimensions both series scored very well.

As mentioned earlier the main purpose of conducting this pretest is not to judge the attractiveness of advertisements

but to assess their message carrying capabilities, one of the ways in which it is done is to get respondent to consider separately the lead time head line illustration. Others, text matter is to play back to the interviewer the precise information or message that he was receiving from each of these elements. It is in this section of the test that the agency can find very interesting qualitative differences between the two series.

In the think series the head line was conveying to the respondent a message saying "plan one's family" the illustration on the other hand was clearly projecting the message "proper child care".

With the now that you are a parent series the response patterns were somewhat different. The head line in this series was predominantly projecting the message "plan one's family". The illustration in this case was conveying a "proper child care" message.

Considering this pattern of response you could decide to recommend the use of think series. The material that was finally prepared for release ranged from press advertisement to point of sale materials of various kinds of classes including posters, hangers, streamers, dispensers and cartons featuring and advertising message, and out door hoarding and bus signs, all featuring the basic think campaign message.

While all the mass impact material which should be exposed to consumers from various segments of the market

featured only the basic think message. The information in the other media was segmented to reach specific target group. The final list of the printed material to be developed is as follows :

URBAN MARKETS:- Two booklets, one entitled "who should have another child" and the other "for a happier marriage.

URBAN MARKET BLUE -COLLER:- A comic strip type booklet explaining in great detail the benefits of spacing and the role that contraceptives had played and are playing in achieving these benefits easily and inexpensively.

RURAL MARKET:- A comic strip story booklet on the spacing concept the "Seeding analogy" is used to project in very simple rural terms the concept of spacing. A parallel is drawn between farmers traditional acceptance of providing space between plants to allow each to grow stronger and healthier and the newer concept of allowing a no. of years between birth of children to enable parents to give each child a better start in life. The two up - market booklet are prepared on an all India basis with the same type of illustration in all languages. The blue collar booklet, the rural booklet and seeding folder are designed with different pictorial styles to make them more regional in appeal. It was felt that by using illustrations resembling more closely the people of particular region in whose languages the material would be printed to whom all the

folders will be distributed. The communication impact and effectiveness of material would increase.

FILMS:- In case of films there is a constraint of showing time and showing style, Obscenity or vulgarity. Particularly films that are screened in urban centres and up market cinemas. It is decided to make three types of films :

(1) Urban up market:- For this segment two films are made. Both the films should appeal to parents in fairly emotional terms and must stress on the need for them to ensure that they give to each child a better start in life by using contraceptives. Demonstrate types and the way in which these contraceptives are used.

URBAN BLUE COLLAR:- This would also reach the surrounding rural markets when farmers and others journeyed to town on their weekly or monthly visits. In this film the concept of spacing by contraceptives use, pleasures, maintenance of sexual routine through contraceptives must be in very simple and clear terms. In one of the up market films and the blue collar four different regional versions are made with pictorial dress variation.

RADIO:- Most suitable in India. In developing radiospots for the family planning campaign and use of contraceptives very severe constraints are imposed :

(1) Time constraint limited the spot to a maximum of sixty seconds

(2) The radio authorities also imposed fairly rigid constraints on the contents of the spot. Nothing should be stated that could in any way create adverse reaction amongst the listeners. Despite these constraints it is possible to develop a message which can once again feature think approach.

MEDIA EXPENDITURE:- This campaign regarding contraceptives and their importance in family planning released via think approach to the press through the directorate of advertising and visual publicity within a short time has become pretty expensive. Other medias can also be added such as P.O.P. items, radio commercials, T.V. films, cinema screening, out door displays. This particular campaign using different medias should be fully operated to promote the concept of contraceptives.

REVIEW:- Contraceptives marketing executive must receive results of yearly activity and compare it with the target result and make improvements for enhancement of contraceptives use for family planning programmes.

SALES RESULTS:- What is the growth of contraceptives sales? There should be no shortage of stocks. Think campaign should get into stride to give vigour to sales. -Contraceptives sales in recent years exhibit that the sales have increased manifold.

SOCIAL GAINS:- Social gains on the basis of couples using contraceptives can be calculated by the cost of one birth averted. Social gains thus rendered should be compare with the

media expenditure on promoting contraceptives for family planning during that year.



## CHAPTER - III

### SURVEY DESIGN

- (1) Purpose of the study.
- (2)
  - A. Survey
  - B. Objectives
  - C. Hypothesis
- (3)
  - A. Survey procedure & Research Methodology.
  - B. Formulation of questionnaire.
  - C. Sampling techniques.

### SURVEY DESIGN

#### Purpose of the study:-

Consumer's attitude and behaviour exhibits a distinct pattern in the purchase of different types of goods including basic essentials like contraceptives. The contraceptives concept is of critical importance and is a basic element for promotion of national interests. A little earlier the campaign to check population growth had lost its vigour and momentum. Infact family planning has been the biggest casualty in the political revolution. The policy of family planning through persuasion has far reaching implications. National statistical records reveal that only 20% of eligible couples truly use contraceptives to promote family planning scheme. The Govt. fails to realize that to poor, stupid and the illiterate village<sup>s</sup> and even some urbanites need contraceptives most. It is basically this section of society which has a stake in large family for economic reasons. Will this section of the population be amenable to use and contraceptives through persuasion. Change in attitude is very resistant to exogenous forces like persuasion and pre supposes a general reconstruction which means education, better health, high incomes and better living standards etc.

The improvement in the education, distribution, sales, usage of contraceptives advocates a radical change in psychological atmosphere. The facts about unbridled growth of population in India are too well known to be recapitalised here. Therefore,

it is indisputable the contraceptives singly provide the easiest method to maintain family and promote social welfare.

Males and females both use this method and they also realize how much service it does to them, besides it provides a considerable choice through its various types and forms, consumer's make a choice on the basis of reliability, fineness, colour, durability, cost, packaging etc. Its popularity is showing a marked increase. Its medicinal importance can not be done away with. It is necessary from, social, economical, health and family welfare point of view.

Keeping in view its importance ~~among~~ both the sexes, the present study was made to observe the preference and purchase behaviour of consumers for contraceptives and the extent of loyalty in use. ~~This~~ method of "consumer's Research" has been adopted to make a accurate study because the knowledge of preferences, needs and desires of consumers enables the organisations producing them more successful, for they can detect what the consumer's want and thus produce exactly that to satisfy the user's most.

#### THE SURVEY

The survey done by me attempts to yield an understanding about the purchasing behavioural pattern of consumer's in relation to various modes of contraceptives. For this purpose

the behavioural pattern of males and females residing in urban localities was studied. The attitude was measured on the basis of information provided by them. Males and females have different behaviour regarding family planning, the mode of contraceptives used by them are different in reference to their body organs. There by their preferences, attitudes, needs, desires show marked variation. They exhibit different drives because of their exposure to different environments, further more its increasing importance and utility among males and females demands a proper and systematic survey. The main objectives of the survey are:-

1. To study the types of contraceptives presently existing in the market, their sales procedure, distribution, communication, promotion and awareness.
2. To study effect of various factors influencing the choice of a contraceptives.
3. To study the factors responsible for changing over to a different mode of contraceptives.
4. To study the extent of preference and attitude change in case of shortage or non availability.
5. To study the effect of price, reliability and other important variables on the use of contraceptives, do fluctuations lead to a total alteration of attitude, if so wholly or partially.

6. To study the effect of various influencers on preference and use of contraceptives.
7. To study seasonal variations and how they effect a physical necessity.
8. To study the media preference and effectiveness in case of promoting sales of contraceptives in a bid to enhance social welfare.
9. To study the feeling regarding sex education in schools in case of gents and ladies.
10. To study the reasons of not adopting this measure despite its importance and reliability.
11. To develop the family planning scheme and emphasise on the use of contraceptives.

#### HYPOTHESIS

H-1.1 There is a well defined pattern of contraceptives preference amongst the respondents.

H-1.2. There is well defined pattern of brand preference among different sexes.

H-1.3 There is a well defined pattern of brand preference -s among the different age groups.

H-1.4. There is a well defined pattern of preferences for contraceptives among different educational level groups.

H-1.5. Reliability is the most desired product attribute in case of both the sexes followed by fineness.

H-1.6. Price plays not such a important role in case of switch over . (Baring exceptionally low in come groups).

H-1.7- Seasonal changes have a direct or indirect or mixed effect on the sales and use of contraceptives.

H-1.8- Personal influences have a great impact on brand choice than the impersonal ones.

H-1.9- Print media is the most potent media vehicle in creating awareness.

H-2.0- Govt. agencies could play predominant role in promoting the use of contraceptives and implimenting F.P. programmes.

H-2.1- Males are more open towards the idea of sex education in schools as compared to their female counter parts.

H-2.2- Mechanical mode is most preferred in case of male s In females too this is most preferred tehcnique followed closely by oral contraceptives.

H-2.3- Older couples adopt permanent method after a definite age.

Accessory:- 1. All do not believe in F.P. and of the lot believing not all truely execute the use of contraceptive

as a means to plan a family.

2. Avoiding of pregnancy is singly the most important reason, spacing in child birth is the next.
3. Misconception regarding health hazards and less trust on efficacy of the method must be dealt with to accelerate the use of contraceptives.

#### Survey procedure and Research Methodology:-

Survey was design to collect information by use of a suitable questionnaire from the gents and ladies residing in urban areas and to determine the eventual result.

#### Method used for collection of data:-

The collection of data was done through personal interviews with the help of a questionnaire that was designed for this purpose. Investigators in course of conducting interviews met with the respondent in face to face situation, which resulted in reliable and more accurate responses. More over during the interview and in course of getting the questionnaire filled it was made clear to the respondents that the information provided by them would be kept strictly confidential and that the study was for purely academic purpose. This facilitated them to give true and quicker responses. 150 male and 150 female respondents were provided with the questionnaire. To my great satisfaction and relief response was 100% although

some forms were improperly filled.

#### Formulation of Questionnaire :-

A suitable questionnaire was designed to collect information relevant to the study and it could include questions of free answer, dichotomous and multiple answer type.

To remove ambiguity in responses and to facilitate the respondents in filling up the questionnaires most of the questions were of dichotomous or multiple answer type for example:

1. Do you believe in family planning ?

Yes                      No

2. Is your wife a working woman ?

Yes                      No

3. Family planning should be compulsory or voluntary ?

Compulsory                      Voluntary

Some of the questions were formulated as multiple choice type.

4. Who influenced you to use contraceptives

i) Friends/relatives    (ii) Doctors    (iii) Husband/wife  
iv) Nobody    (v) Government propaganda

5. Rate the order of preference in case of following media vehicles which could popularise family planning programmes.

(i) Press    (ii) Cinema    (iii) Radio    (iv) T.V.    (v) Government bodies.

In order to minimize ambiguity in responses care has been taken to remove inaccuracy while formulating the questions



The questions were kept very clear, simple and short and to minimize the probability of inaccurate answers all respondents were selected from urban areas and all of them were educated i.e. not totally illiterate. More over to reduce incorrect answers and incongruity due to loss of prestige, income factor has been kept as a subsidiary rule.

#### Sampling techniques :-

Keeping in to consideration diffrent constraint such as time, money, and resources it was not possible to take a very large sample size or to distribute the questaonnaire randomly.

Hence selection was made on the basis of convenience sample.

300 questionnaires in all. (150 males and 150 females) were distributed among a selected group of married makes and ladies.

To my great personal satisfaction the response was overwhelming .

However I would make it clear that some of the forms were improperly filled and left incomplete.

Distribution was a follows.

#### Distribution of Questionnaires

S.No.	Sexes	No. of forms distributed	No. of Respondents	% responding
1.	Male	150	150	100%
2.	Female	150	150	100%
Total		300	300	100%

Some forms were however not filled to complete satisfaction.

The questionnaires were distributed with the help of friends, relatives, Doctors and lecturers at college. Some forms were distributed to Industrial people and businessman. Effort was made to cover all classes of society. Before the start of actual survey necessary instructions were given to them so that they had a lucid understanding of the procedure to be applied. The investigators were asked to distribute the questionnaires as randomly as possible.

After Survey Discussions were held with investigators and they revealed some respondents were feeling inhibited in giving responses due to various logical and illogical reasons. However to my utter surprise and delight ladies appeared to be for more accomodating than expected and some exhibited real confidence while answering and discussing the Questions without being offended in the least.

## CHAPTER - IV

### ANALYSIS AND RESULTS

## Variables

S.No.	Particulars	Total
1.	No. of Males interviewed	150
2.	No. of Females interviewed	150

S.No.	Particulars	Total
1.	Out of the males interviewed. How many belong to	
	20 - 30 age group	99
	30 - 40 age group	35
	40 and above age group	16

S.No.	Particulars	Total
1.	Out of the ladies interviewed. How many belong to	
	20 - 30 Age group	104
	30.- 40 Age group	36
	40 and above age group	10

S.No.	Particulars	Total
1.	Out of the 150 males interviewed.	
	How many are	
	1. Under graduates	31
	2. Graduates	25
	3. Post graduates	36
	4. Highly professional	53

S.No.	Particulars	Total
1.	Out of 150 ladies interviewed.	
	How many are,	
	1. Under graduates	34
	2. Graduates	22
	3. Post graduates	43
	4. Highly professional	51

---

S.No.	Particulars	Total
<hr/>		
1.	No. of males having income range from	
	(1) 500 - 1000 Rs.	40
	(2) 1000 - 1500 Rs.	25
	(3) 1500 - 2000 Rs.	35
	(4) 2000 - 2500 Rs.	35
	(5) 2500 Rs & above	15

---



---

S.No.	Particulars	Total
<hr/>		
1.	No. of females who are house wife's	56
2.	No. of females having income range between	
	(1) 500 - 1000 Rs.	14
	(2) 1000 - 1500 Rs.	35
	(3) 1500 - 2000 Rs.	10
	(4) 2000 - 2500 Rs.	35

---

S.No.	Particulars	Total
1.	Out of the males interviewed, How many belonged to	
	(1) 4th class service employee's	40
	(2) Management cadre people	35
	(3) Educational group	25
	(4) Businessmen group	15
	(5) Professionals (Doctor etc.)	35

S.No.	Particulars	Total
1.	Out of the females interviewed, how many belonged to	
	(1) House wives group	56
	(2) 4th class service employees	14
	(3) Educational group	35
	(4) Management cadre	10
	(5) Professional group	35

S.No.	Particulars	Total
-------	-------------	-------

Out of the males interviewed, how many  
were

1.	Urbanites	All
2.	Semi- urbanites	
3.	Rural groups	

S.No.	Particulars	Total
-------	-------------	-------

Out of the ladies interviewed.  
How many were

1.	Urbanites	All
2.	Semi urbanites	
3.	Rural groups	



Table - 1

## Period of Marraige

Sl.No.	Particulars	Total
1.	No. of Males Married between 1965-1970	16
2.	No. of Males Married between 1970-1975	35
3.	No. of Males Married between 1975-1980	52
4.	No. of Males Married after 1980	47
1.	No. of females Married between 1965-1970	10
2.	No. of females Married between 1970-1975	26
3.	No. of females Married between 1975-1980	55
4.	No. of females Married after 1980	59

Table - 2

No. of Children and Need of cantraceptives

Sl.No.	Particulars	Total
1.	No. of males having one child	43
2.	No. of males having two children	65
3.	No. of males having 3 children	18
4.	No. of males having more than 3 children	27
1.	No. of females having one child	68
2.	No. of females having two children	44
3.	No. of females having 3 children	16
4.	No. of females having more than 3 children	10
1.	No. of males having no child	Nil
2.	No. of females having no child	12

Table - 3PROFESSIONAL WOMEN & THEIR REQUIREMENT'S

Sl. No.	Particulars	Total
1.	Out of 150 males interviewed, how many have working wifes.	27
2.	No. of those males who have merely Housewives.	123
1.	Cut of the 150 females interviewed how many of them are working women	94
2.	No. of House Wives.	56

\*\*\*\*\*

Table - 4

## Family planning &amp; its approval

Sl. No.	Particulars	Total
1.	How many males believe in Family planning ?	112
2.	How many do not ?	38
1.	How many females believe in Family Planning ?	130
2.	How many do not ?	20
1.	Out of the males believing in Family Planning, How many feel it should be voluntary ?	72
2.	How many feel it should be compulsory	40
1.	Out of the females believing in Family Planning, how many feel it should be voluntary ?	65
2.	How many feel that it should be compulsory.	65

Table - 5

## Contraceptive user's &amp; Type

Sl.No.	Particulars	Total
1.	How many males use contraceptives ?	94
2.	How many do not ?	18
1.	How many females use contraceptives ?	103
2.	How many do not ?	27
1.	How many Men use Mechanical contraceptives ?	All
2.	How many use Chemical contraceptive ?	34
3.	How many resort to permanent methods?	24
1.	How many females use Mechanical contraceptives ?	72
2.	How many use Chemical contraceptives ?	48
3.	How many use oral contraceptives ?	42
4.	How many resort to permanent types ?	13

Table - 6

## Awareness about contraceptives

Sl.No.	Particulars	Total
1.	How many males are aware of various types of contraceptives being sold ?	All
2.	How many could recall 1-2 names of contraceptives ?	150
3.	How many recalled three or more names ?	105
1.	How many females are aware of various types of contraceptives being sold ?	136
2.	How many could recall 1-2 names of contraceptives ?	120
3.	How many recalled more than three names	84

Table - 7

## Reasons for contraceptives usage

Sl. No.	Particulars	Total
How many males use contraceptives		
1.	To contain the no. of children	21
2.	To avoid fear of pregnancy	34
3.	for proper spacing in child bath	22
4.	for health reasons.	15
How many females use contraceptives		
1.	To contain the no. of children	12
2.	To avoid fear of pregnancy	51
3.	for proper spacing in child bath	26
4.	for health reasons.	14

TABLE - 8

S.No.	Particulars	Total
How many males using contraceptives say		
1.	It does not effect sexual Activity.	33
2.	It affects vitality & vigour Adversely	34
3.	Its use affects health	27
How many female using contraceptives say		
1.	Its use does not affect sex activity	63
2.	It affect vitality & vigour Adversely	35
3.	Its use affects health	25

\*\*\*\*\*



Table - 9

## Classification of contraceptives users

S.No.	Particulars	Period of use
Out of the males using contraceptives		
How many are using.		
1.	Mechanical 69	Since Marriage
2.	Chemical 21 acc.	Accessory made.
3.	Permanent 25	After the last child's birth.
Out of the females using contraceptives		
How many are using.		
1.	Oral 34	Since Marriage
2.	Chemical 24 acc.	Accessory made
3.	Mechanical 59	2-3 years after marriage.
4.	Permanent 10	After the last child's birth

Acc. -- accessory

T A B L E - 10

Switch over to different modes

---

S. No.	Particulars	Total
<hr/>		
	Out of the males using contraceptives	
1.	How many have used other forms besides the present Mode.	71
	Out of the females using contraceptives	
2.	How many have used other forms besides the present mode.	83

---

T A B L E - 11

Discomfort due to the mode of contraceptive being used.

S.No.	Particulars	Total
	How many males complain of side effects due to present mode of contraceptives ?	48
	How many do not ?	51
1.	How many females complain of side effects ?	49
2.	How many do not ?	54

T A B L E - 12

Product attributes (Male out look)

---

S.No.	Particulars	Total
<hr/>		
	Which attribute of a contraceptive impresses the males most.	
1.	Reliability	74
2.	Cost	23
3.	Fineness	54
4.	Durability	22
5.	Packaging	9
6.	Colour	13

---

T A B L E - 13

## Product Attributes (Female out look)

S.No.	Particulars	Total
What attribute of a contraceptive impresses the ladies most.		
1.	Reliability	68
2.	Cost	31
3.	Fineness	54
4.	Durability	22
5.	Colour	13
6.	Packaging	9

Table-14

## Preference order among contraceptives (Ladies)

S.No.	Particulars	Total
1.	Preference order of contraceptives in case of females.	
1.	Oral	37
2.	Mechanical	53
3.	Chemical	3
4.	Permanent	10

Table-15

## Preference order among different mode of contraceptive

S.No.	Particulars	Total
1.	Preference order of contraceptive in case of males.	
1.	Mechanical	66
2.	Permanent	23
3.	Chemical	5

Table-16

## Seasonal effects

S.No.	Particulars	Total
1.	In which season the use of contraceptive more intense in case of males.	
1.	Winter	53
2.	Summer	Other uniform use in all season
1.	In which season the use of contraceptive is more intense in case of ladies.	
1.	Winter	42
2.	Summer	Other uniform use in all season.

Table-17

S.No.	Particulars	Total
1.	How many males feel better contraceptives should be introduced.	49
2.	How many are satisfied with present mode	45
1.	How many females feel that better contraceptives should be introduced.	17
2.	How many are satisfied with present mode.	86

T A B L E - 18

Influences leading to use of contraceptives

S.No.	Particulars	Total
1.	How many males were influenced to use contraceptives by	
	1. Doctor	32
	2. Friends/relatives	12
	3. Wife/Husband	9
	4. Govt. propaganda	21
	5. No body	21



T A B L E - 19

## Influences leading to use of contraceptives

S.No.	Particulars	Total
1.	How many females were influenced to use contraceptives by	
	1. Doctor	42
	2. Friends/relatives	4
	3. Wife/husband	41
	4. Govt. propaganda	8
	5. No body	8

T A B L E - 20

Govt. efforts to promote F.P. - A measurement

---

S.No.	Particulars	Total
<hr/>		
1.	Out of the 8 males interviewed. How many feel that Govt. campaign regarding F.P.	
	1. Effective	65
	2. Ineffective	30
	3. More effective campaign should be done.	55

---

T A B L E - 21

Govt's effort to promote F.P. - A measurement.

S.No.	Particulars	Total
1.	Out of the female interviewed. How many feel that Govt. campaign regarding F.P.	
	1. Effective	43
	2. Ineffective	45
	3. More effective campaign should be done.	62

T A B L E - 22

## Sex education &amp; Its importance

S.No.	Particulars	Total
1.	How many males feel that sex education should be Imported in Schools	122
	How many reject this concept	28
2.	How many females feel that sex education should be imported in schools	71
	How many reject this concept	79

Table-23

Media selection - Male out look.

S.No.	Particulars	Total
1.	Order of preference for the media of Advertising in case of males	
1.	News paper Magazines	82
2.	Cinema	31
3.	Radio	21
4.	Telivision	16
5.	Govt. Agencies suggested by 52 males	

Table-24

Media selection - Ladies out look

S.No.	Particulars	Total
1.	Order of preference for the media of Advertising.	
1.	Cinema	51
2.	News paper Magazine	34
3.	Radio	38
4.	Telivision	27
5.	Govt. Agencies suggested by 32 ladies	

Table- 25

Prices - do they really effect.

S.No.	Particulars	Total
1.	How many males feel that the prices of contraceptives are reasonable.	68
2.	How many feel they are costly.	26
1.	How many ladies feel that prices of contraceptives are reasonable.	71
2.	How many feel that they are costly.	32

T A B L E - 26

Non users and their explanations - Male out look

---

S.No.	Particulars	Total
<hr/>		
1.	Many males do not use contraceptives because,	
	(1) Fear of side effects	23
	(2) Not convinced of there efficacy	25
	(3) Not available	Nil
	(4) Fear it reduces sexual potency	4
	(5) Religious reasons	4

---

T A B L E - 27

Non users &amp; their explanations (Ladies point of view)

S.No.	Particulars	Total
1.	Many females do not use contraceptives because of	
	(1) fear of side effects	21
	(2) Not convinced of there efficacy	6
	(3) Not available	Nil
	(4) fear it reduces sexual potency	12
	(5) Religious reason	8



RESULTS AFTER ANALYSIS

(1) Out of the 150 males who were interviewed 27 had working wives i.e. 18%. No of males whose wife's were merely house wives were 123 and hence they sum up to 82% . Out of the 150 ladies interviewed 94 were working women i.e. 62.66%. No of female who represented the house wives group was 37.33%.

(2) Out of 150 males who were interviewed only 112 exhibited their staunch trust in the family planning programme i.e. 74.66%.

38 males showed their disbelief and distrust in this scheme i.e. 25.33%. Out of the 150 ladies who were interviewed 130 exhibited marked confidence and belief in this programme i.e. 86.66%, whereas 20 females from the ladies sample group showed that this hypothesis and practice did not mean much to them i.e. 13.33%.

(3) Out of the 112 males believing in family planning programme 72 stated that it must not be a compulsion, however this practice should be only through voluntary efforts of man i.e. 64.28%. While 40 males stated that it should be enforced as a measure and the Govt. should work for efficient management and control of this programme i.e. 35.7% of the 130 ladies believing in this programme 65 said it should be

enforced as a measure and the Govt. should work for efficient management and control of this programme i.e. 35.7% of the 130 ladies believing programme 65 said that it should be voluntary and this refers that they constitute 50% of the target worked upon. 65 ladies said that it should be compulsory i.e. 50% again.

(4) Out of 112 males interested in family planning schemes 94 really settle down to use contraceptives as a mode to achieve the objective of social welfare through use of family planning methods i.e. 83.92%.

18 refuse to use this mode due to various logical and illogical, conventional and other inevitable reasons i.e. 16.08%. Out of the 130 females who are interested in family planning, 103 really use contraceptives of different varieties having different attributes to contain and maintain a family and promote social welfare i.e. 79.23%. 27 ladies do not entertain and implement this mode i.e. 20.76%.

Out of the male users who sum up to 94 all use mechanical contraceptives example durex, kohinoor, share, durapec, tahiti, nirodh etc. i.e. 100%. 34 males also use chemical contraceptives like pastes foam tablets and Jellies i.e. 36.17%. This is however only an accessory mode. 24 males have got vasectomy performed i.e. 25.53%. Similarly in case of ladies 72 out of 103 use oral contraceptives i.e. 69.90%. Some of them complain of side effects like obesity and

disturbed menstrual cycle. 48 ladies use chemical contraceptives yet they do not show complete preference for this mode and give obvious complains like burning and messiness i.e. 46.6%. 42 ladies cu.t., cu 7, multi load loops, I.U.C.D. etc. i.e. 41.77% this appears to be a very convenient and reliable method barring a few exceptions. i.e. 40.77% say that this is a preferable method. 13 ladies have got tubectomy performed i.e. female sterilization. Only 12.62% ladies have resorted to permanent measure for family planning.

(5) Awareness:- Out of the 150 males interview all of them were able to recall the name of one or two contraceptives i.e. 100%. 105 males had the ~~potential~~ to refer three or more than three names of the contraceptives. However not all of these could recall the name of companies producing that particular brand i.e. 70%.

136 out of 150 ladies could recall the names of one to two contraceptives and pass the awareness test i.e. 90.66%. 120 could recall the names of the contraceptives yet not the companies producing them i.e. 80%. 84 out of 136 ladies could recall the name of more than three contraceptives and the firms producing them i.e. 61.76% .

(6) Reasons for contraceptives use:- In case of males,

1. 22.34% males use contraceptives to contain the no. of children.
2. 36.17% males use them to avoid fear of pregnancy.
3. 23.40% males use contraceptives for proper spacing in child birth.

(4) 15.96% of the males sample group adopt contraceptives for health reasons.

1. In case of ladies 11.65% females practice family planning methods to contain the no. of children.

2. 49.51% ladies use contraceptives for avoiding fear of pregnancy.

3. 25.24% of ladies use contraceptives for proper spacing in child birth.

4. 13.59% of the ladies sample adopted this measure for health reasons.

(7) Side effects of contraceptives:- Out of 94 males using condoms and other modes of contraceptives 33 stated that it does not lead to disinterest in sexual intercourse and that it has absolutely no effect on physical compromise i.e. 35.1%. 34 males said condoms effect the sexual vitality and vigour adversely, and that there is loss of sensation during the activity. i.e. 36.17%. 27 males also reiterated that it could lead to health hazards. (Refers chemical contraceptives) they come up to 28.72%. 63 out of 103 ladies said inspite of use of this method the sexual activity remain normal i.e 61.16%. 35 ladies said that the intensity and desires are curbed to a marked extent i.e 33.98%. 25 ladies said that health hazards also resulted because of the use of contraceptives - 24.27%.

(9) Of the 94 males using contraceptives 69 use condoms of specific types like durex tahiti share and kohinoor. 73.4%. 21 males also used jellies, pastes and foam tablets as a accessory method besides condoms i.e. 22.34%. 25 males had vasectomy done upon them i.e. 26.59%.

Rating of contraceptives - according to males:-

1. Mechanical, to be used in form of condoms.
2. Permanent.
3. Chemical.

Rating of contraceptives - according to females:-

1. Mechanical.
2. Oral,
3. Permanent.
4. Chemical.

(10) 71 out of 94 males reported that they have tried other contraceptives besides the present mode. The switch over may be for preference, convenience, cost or availability reasons, this was said by 75.53% of male contraceptives users.

In case of females 83 out of 103 out of the target sample had reported that they had used other modes before switching over to the present form.

(11) Side effects and contraceptives usage:-

45.74% of males, it means 43 out of 94 males reported that there have been no side effects. Whereas 51 out of 94

have it that there are side effects. 54.25% males complained of allergy, loss of sensation, irritation, burning, messiness etc. due to use of contraceptives. In case of ladies 49 out of 103 reported of facing no side effects i.e. 47.57% whereas 54 out of 103 reported of side effects like depression, irritation, messiness, bleeding, irregular cycle, burning, nausea etc. i.e. 52.42%.

(12) Attributes test:-

74 out of 94 males using contraceptives reported that reliability is of prime importance followed by fineness, cost etc. Result of attribute test is as follows.

1. 78.72% of males voted for reliability.
2. 57.44% of males voted for fineness.
3. 24.46% of males decried the high cost of some contraceptives.
4. 23.42% said condoms are less durable.
5. 13.8% said condoms of various colours add to the attractiveness of the contraceptives.
6. 9.5% males said that packings should be improved.

Even the ladies gave highest attribute points to reliability, 66% ladies i.e. 68 out of 103 opted for reliability of a contraceptives. ladies also decried high cost of some mechanical contraceptives, but they constituted only 30% of the interviewed targets. 31 out of 103 ladies passed the above statement. 13.59% ladies also voted for fineness and durability fineness individually was approved why 27.18% of the females

interviewed.

(13) Preference in case of males:-

1. Mechanical - by 70.21%.
2. Permanent - by 24.46%.
3. Chemical - by 5.3%.

Preference in case of females:-

1. Mechanical - by 51.5% .
2. Oral - by 35.9% .
3. Permanent -9.5% of the ladies target sample voted for this method.
4. Chemical-only 2.9% voted for chemical contraceptives.

(14) Contraceptives and seasonal effects:-

Both ladies and gents in great proportions said that contraceptives are used more in winters due to greater desires and intensity thus exhibiting seasonal effects. 55 out of 94 males said winter is more preferable season i.e. 56.38%. The rest said that the process and the use is uniform and spontaneous through out this year.

(15) Better modes of contraceptives to be introduced:-

19 out of 94 males i.e. 52.11% insisted that still better forms of contraceptives should be introduced and marketed. 45 out of 94 said that the present modes are satisfactory. 17 out of 103 female said that they are not satisfied by the

present form of contraceptives and therefore better varieties must be introduced i.e. 16.5%. 86 out of 103 ladies that they are thoroughly satisfied with the recent contraceptives devices i.e. 83.5%.

(16) Influencer's and their impact:-

The male sample yielded the following result.

1. Doctors influenced 34% i.e. 32 out of 94 males.
2. Friends influenced 12.76% i.e. 12 out of 94 males.
3. Wife's influenced their husband's to use contraceptives the rate was 9.5% i.e. 9 out of 94 males.
4. Govt. propaganda forced 24 out of 94 males to use contraceptives i.e. 22.34%.
5. 21 out of 94 males reiterated that nobody influenced them to use contraceptives. They constitute 22.34% of the target sample.

The females rendered the following notification regarding influence and usage of contraceptives.

1. Doctors influenced 40.77% ladies to use contraceptives for the purpose of F.P.
2. Friends influenced only 3.88% husbands influenced 39.8% of ladies to use contraceptives.
3. Govt. propaganda had influenced 7.76% i.e. 8 out of 103 ladies.
4. 7.76% of the target sample emphasised that they were not influenced by anybody.



(17) Effectiveness of Govt. propaganda :-

In case of males the following result was obtained.

1. 43.3% stated that Govt. campaign regarding F.P. is effective.
2. 20% said it is not effective.
3. 36.66% said that more effective campaigning should be done and provided suitable suggestions. In case of females the data obtained is as under :
1. 28.66% said that the Govt. campaign is effective.
2. 30% reiterated that it is not effective.
3. 62 out of 150 i.e. 41.33% suggested that necessary steps should be taken to promote the present campaign.

(18) Sex education and its importance:-

Different opinions were acknowledged in case of different sexes. Males were more open about the concept and 81.33% said schools must work upon sex education schemes while 18.66% refused this view point fully. In case of ladies 52.66% said blank no. 47.33% felt that it was necessary sex education at school level for proper physical development. Besides it could shirk away the inhibitions regarding the subject.

(19) Media preference in consumers minds:-

The following result was obtain in case of males.

1. News paper - 54.66% said that it is the most preferred media.
2. 20.66% felt that cinemas a very effective.
3. 14% suggested that radio, service could be a suitable media.

4. 10.66% said T.V. is the most suitable media.
5. 34.66% suggested that Govt. agencies should promote the sales of contraceptives.

In case of females the following result was eventually obtained:-

1. Cinema, voted by 34%.
2. Radio - voted by 25.33%.
3. News papers - 22.66% of the ladies sample said that this is the most preferable media.
4. Television - 18% of the sample voted for this media class.
5. 21.33% of the sample stated that Govt. agencies must come into play.

(20) Prices and contraceptives:-

68 out of 94 males reported that present prices are reasonable taking into view their purchasing power and needs. i.e. 72.5%. While 26 out of 94 males said that the prices are higher. i.e. 27.66% in case of females 68.93% of the sample felt that the prices are reasonable. 31% voted against the present price index. Thus Govt. should take steps to control and reduce the prices.

(21) Why people don't use contraceptives:-

Following reasons were forwarded in case of male sample.

1. Fear of side effects by 41%

2. 44.64% i.e. 27 out of 56 males are not convinced of their efficacy.
3. 7.14% fear that it reduces sexual potency.
4. 7% do not use it for religious reasons.

In case of the ladies the data obtained is:

1. 44.68% fear of its side effects.
2. 12.7% are not convinced of their efficacy.
3. 25.53% feel it might reduce sexual potency.
4. 17% do not use it for religious reasons.

150 gents and 150 ladies were given the questionnaire and they responded overwhelmingly. Of the males interviewed 99 belong to 20 - 30 age group i.e. 66%. 35 males belonged to 30 - 40 age group. 16 out of 150 belonged to 40 and above age group i.e. 10.66%. Thus 20 - 30 age group constituted the most eligible couples group and they require the contraceptives most. The 30 - 40 age group form mature groups and the 40 and above age group forms the older couples group. 104 out of 150 ladies belonged to 20 - 30 age group i.e. 69.33%. 26 out of 150 ladies belonged to 30 - 40 age group i.e. 17.33%. 10 out of 150 females belonged to 40 and above age group i.e. 6.66%. Here I would elucidate that different attitudes and requirements are exhibited by ladies and gents of different age groups.

31 out of 150 males i.e. 20.66% were under graduates, 16.66% were graduates, 24% had post-graduate qualifications and 35.33% were highly professional. 34 out of 150 ladies i.e.

22.66% were under-graduates 28.66% had post-graduate qualifications 14.66% were graduates and 34% were highly professional. Ladies and gents with different qualificational standards thought differently. About the use of contraceptives as a measure to contain family. Under graduates wer less aware about different type of contraceptives. While more educated groups were definitely more aware and interested in using different types of contraceptives for the purpose of managing a family. They have tried generally more than one mode of contraceptives.

26.66% of males had income lying in range of Rs. 500/- 1000/-. 16.66% had there income range between Rs. 1000-1500. 23.33% had their income range lying between Rs. 1500 - 2000. 23.3% had their income lying between 2000 - 2500. 10% had more than 2500 as their income. In case of lallies 37.33% belonged to the house wife tribe. 9.33% were earning between 500 - 1000 Rs. 22.33% earned between 1000 - 1500Rs. 6.66% earned between 1500 - 2000 Rs. and 22.33% earned more than 2000 Rs. Uses of low income and middle income(1000 - 1500). Complained that the prices of contraceptives are high and hence their budget does not favour the idea of using more refined and reliable contraceptives ladies stated that oral contraceptives were very costely and even some mechanical contraceptives like cu - 7, cu -t. multi loads were not with in their income reach, they further revealed that some contraceptives mainly chemical were not worth it. Therefore they need to be improved. Males said condoms

like kohinoor, tahiti, shaire, and durex are high priced and they must be low priced for wider adoption.

26.60% of males belonged to the fourth class service group. 23.33% of males were having management cadre status. Lecturers, Professors, Readers and Head of various education Departments constituted 16.66% of the sample. 10% of the males were business men from different spheres. 23.33% were highly professional people mainly doctors, journalists and industry owners etc.

In case of ladies 37.33% were merely house wives. 9.33% belonged to the fourth class service groups. 23.33% belonged to educational group. Similar to the male educational group. 6.66% ladies held management positions in different industries. 23.33% were Doctors, M.B.A.'s, and Engineers etc. They revealed different attitudes as apparent from the results obtained.

## C H A P T E R - V

RECONSIDERATION OF THE HYPOTHESIS

CONCLUSIONS & SUGGESTIONS

### Reconsideration of Hypothesis

H.1.1: States that there is a well defined pattern for contraceptive preference amongst the respondents.

Different Males exhibit a definite pattern of preference which may be summed up as follows :

1. Mechanical
2. Permanent
3. Chemical

In case of ladies too the preference for different contraceptives could be listed as follows :

1. Mechanical
2. Oral
3. Permanent
4. Chemical

Thus the hypothesis stands true and tested.

H.1.2 & 1.3 : Different age groups have a well defined pattern of preferences.

The 20-30 age group of males and females shows a marked preference for mechanical methods of contra-ception. In case of ladies oral contraceptives is fast rising in the preference list..

H.1.4 : There is a well defined pattern of preferences amongst different educational levels.

From the results obtained it is obvious that education plays a definite part in the acceptance of the use of different

modes of contraceptives. To refer, More educated group goes in for more refined and more recent forms of contraceptives where as those with lower educational standards primarily satisfy their needs through the conventional forms because they are not aware of the recent forms which have been brought into the market.

H.1.5 : Reliability is the most desired product attribute in case of both the sexes followed by fineness.

A majority of the sample from both the groups, i.e. male and female stated that they all go in for reliability and there fore in measuring the importance of different attributes reliability stands frist. Males reiterated that the condoms should also be of excellent quality and should be of very fine texture such that its use does and cause a hinderence. in sensational pleasure because that is the basic physiological need. In case of ladies too similar result was obtained. Packaging, durability have less significance. In case of males colour for different condoms was also a factor of consideration.

H.1.6 : Price does not play a very important role in case of switch over, because generally both the sexes revealed that most of the contraceptives do not hamper or reduce the purchasing power if brought into use. However, a small section of my sample insisted that they belonged to lower income groups and hence price played a determining role in selection of a contraceptives, hence it the better



and more refined varieties were high priced they could not go in for their purchase, notwithstanding the fact that they realize the reliability and fineness of costlier forms. Thus hypothesis is tested and proved.

H.1.7 : Seasonal changes have a <sup>pronounced</sup> impounding influence on sales and use of contraceptives. A measurable portion of the sample exhibited that winter is the most preferable season. The intensity and drives are higher in this season thus the need of contraceptives is more. We could therefore relate that the purchase of the product is increased, i.e. the sales rise. However the other section stated that the process remains uniform throughout the season hence you could not really say as to which season is more preferable.

Hypothesis is only partially true hence not acceptable in totality.

H.1.8 : Personal influences have a great impact on brand choice than the impersonal ones. In both cases Doctor was the most powerful influencer. This was followed by husband and wife influencing each other for adoption and practice of contraceptives. The others are not very influential. Govt. propaganda is not effecting them to a measurable extent and hence the style and system needs to be improved. Thus hypothesis stands tested and proved.

H. 1.9: Print media is definitely most effective, the males tendered this result however in case ladies the degree of newspaper readers was low and they opted for Radio as a media to promote the use of contraceptives. i.e., broadcast media is suitable to them. Thus for males this hypothesis stands true ladies veto this concept.

H. 2.0 : The Govt. agencies could play a predominant role in implimenting family planning programmes and introduction of use of contraceptives. Therefore they could serve the society and nation at large. Mostly the Doctors and people involved in medicinal field think that this phenomixon could stand true however there is a small section of my sample which refuted this concept in totality. Thus this hypothesis stands tested and proved.

H.2.1 : Males are open towards the idea of imparting sex education in schools. Almost 80% of the target sample of males condescended with this condept. Even in case of ladies morethan 50% really wanted this scheme to be implemented in full swing. However there were some reserved ladies and gents who showed significant inhibitions regarding the promulgation of this programme. This hypothesis also stands tested and proved.

H. 2.2 & H.2.3 : State that mechanical mode of contraceptives is most preferable in case of both the sexes, In case of ladies oral contraceptives are almost equally preferred. However one

point which requires attention is that after a certain age the permanent method is generally adopted. My inference from the table and then the analytical study elucidates that this concept is also true to a measurable extent. Hence this hypothesis also stands tested and proved.

All the accessory hypothetical considerations about believing in family planning and the use of contraceptives as a means to plan a family and avoiding of pregnancies which is considered to be the most important reason for using the contraceptives also stands true and tested. Lastly mixed conception regarding the health hazards and less trust on efficacy of the different types of contraceptives are also prevailant and these cause a hindrence in the promotion and use of contraceptives.

## C O N C L U S I O N ' S

Much has already been said about the preferences for contraceptives for various segments of society in this dissertation. After a concrete study I have been able to bring out some of the basic consumer characteristics (These have been assessed and tested) which can be successfully applied to marketing and promotional programmes for enhancing contraceptives sales. The Indian firms operating under a defined environment could use some of the illustrative findings to their advantage.

Mechanical devices are most commonly used by both the sexes therefore production programmes by existing and new firms should be developed along these preferences.

Targeting of market should concentrate on eligible couples belonging to different age groups. Ladies could be exposed to various communication devices to enable them to comprehend the use and effectiveness of contraceptives- more specifically mechanical & oral.

I would suggest that the firms must take into acknowledgement the educational levels of users and those eligible for using contraceptives of different segments of the target market. More educated groups tend to explore and accept the latest and most refined forms of

contraceptives. For those who are less educated and illiterate simple communication schemes should be introduced to inform, persuade and accept the product. Here mass communication pattern should be introduced & brought into use, like sign boards, hangers, posters, Radio and regional newspapers and magazines.

Reliability i.e., potential to check conception is most important product attribute in case of males and females. Therefore quality control techniques should be updated to ensure the same. Fineness is the basic product attribute for condom users, hence texture, sensitivity and colour to a illustrative extent must be given their due weightage in manufacture. In case of oral contraceptives adulteration should be checked, the composition of ingredients is also to be given thought to.

Since it is the sellers market all the way which is divisible into three distinct segments

1. higher income groups
2. middle income groups
3. lower income groups

In our nation indisputably the third category constitutes the majority thus pricing policy should be taking into account the need for an economical product. However higher income groups do not respond noticeably to price flu-

circumstances and they insist on product of quality irrespective of price.

Scheduling of Advertisements should be concentrated to winter season which according to the study is the most suitable season. However communication of product's importance and use should be maintained at a steady pace throughout the year because sex is a physiological drive and is therefore spread throughout the year.

Doctors are the most powerful influencers and hence must work with all sincerity to accelerate the use of the contraceptives and must also inform about the latest innovations. This they should also do in a bid to subserve the national interests. Government agencies should also enlarge and improve their communication programmes and strategy to influence the target mass to really accept the product.

Print media is most effective for exposing the audience to contraceptive features. Hence advertisements must be catering to the desires and attention of both the sexes. The message to be communicated must really be convincing, this is applicable to broadcast & print media also. In case of sign boards and hangers and transit media visual illustrations could prove fruitful.

Government agencies can play a predominant role in informing and persuading the people to use the contraceptives. Thus Plan expenditures could be increased for government agencies spending.

Sex education should be imparted in Schools as this enables a proper physical development and realistic approach towards sex, both ladies and gents in large proportions expressed views conforming to primary sex education.

Mature couples after a definite postmarital period feel that they should adopt permanent devices ie., sterilizations.

I would also like to bring it to your information that besides the married couples, unmarried people and young boys and girls who do not have sex reservations and go in for physical compromise must also be considered as a section of the consumer market, as they constitute quite a number of the entire consumer market. This is a conclusion made after receiving first hand informations.

\*\*\*\*\*

### Suggestions

#### 1. Health aspects and the use of contraceptives.

This point has been more than often a matter of management debate. They say contraceptives are a must to safeguard the health of the mother and child to promote the family well being. Thus contraceptives help in :-

- 1) Avoidance of unwanted pregnancies.
- 2) limiting no. of child births.
- 3) proper spacing.
- 4) limiting of births, particularly last and first in relation to age of mother. If contraceptives are used, it could result in substantial child health benefits. Management forum lists the basic positive rules for it :-

- 1) Child mortality
- 2) Child growth and development.
- 3) Prevention of infectious diseases.
- 4) Checking of congenital anomalies.
- 5) Intelligence, low I.Q. is observed in case-there are many children in a family.
- 6) Chronic diseases are avoided.

Thus contraceptives and population are related in a inverse Ratio.



Community aspects and use of contraceptives.

(a) Social aspect.

Small family will serve the welfare of individuals and of family, thus use of contraceptive has its own importance. Many juvenile delinquents hail from large families with poor incomes. Thus to create a social welfare state, family planning through use of contraceptives is necessary.

(b) Economic aspects.

Poverty, hunger, unemployment, under employment are all due to population rise and this could now be checked through the use of contraceptives. Thus introduction of contraceptives in the market and emphasis on its use will correct economic evils to a measurable extent.

(c) Political aspects.

It is known that over population is an Important cause of political instability civil disobedience mutiny, revolutions and wars, so why not avoid it by the simplest possible method "please use contraceptives."

(d) Enviromental aspects.

In rich and poor countries alike population pressure is the root cause of environmental degradation. Hence contraceptives have a impounding significance.

## APPENDICES

### QUESTIONNAIRE

SUBJECT :- CONSUMER'S PREFERENCE & MARKETING OF CONTRACEPTIVES

---

Dear Sir/Madam,

I am conducting a survey on "consumers Preference and Marketing of Contraceptives" for my dissertation work in partial fulfillment for completion of M.B.A. course. Your assistance is desired to help me to make an accurate and result oriented study. This questionnaire is being forwarded to you and your earnest, frank and candid response would be welcome. I do assure you that this is for purely academic purpose and the informations received shall be kept confidential. A speedy response is expected.

Yours faithfully,

Bhuvan Mittal

M.B.A.Final Year student

(Note : A brief classification of different types of contraceptives is being provided at the end of the questionnaire for your convenience).

Please tick in the bracket of the answer that you feel is most suitable from the alternatives provided at the end of each question. Where statements are desired please answer in not more than 20 words. In case you are not using contraceptives please answer question number 2,3,4,7,15,16,17,18 and 19 only.

QUESTIONS

1. (a) Since when you have been married ?  
-----
- (b) State the no. of children you have ?  
number of male children (    ) number of female  
children (    ) you do not have any child (    )
- (c) Do you plan to have another child ?  
Yes (    )                      No (    )
- (d) If you are a male specify if your wife is a working  
woman ?  
Yes (    )                      No (    )
2. (a) Do you believe in family planning ?  
Yes (    )                      No (    )
- (b) If yes tick any one of the answers given below ?  
It should be compulsory (    ) It should be volunt-  
ary (    )
3. (a) Do you use contraceptives ?  
Yes (    )                      No (    )
- (b) If yes what types of contraceptives do you use ?  
Behavioural (    ) Oral (    ) Mechanical (    )  
Chemical (    ) Permanent (    )
4. (a) Are you aware of the types of contraceptives avail-  
able and the forms in which they are sold ?  
Yes (    )                      No (    )

If yes, name the different types of contraceptives you know and the form in which they are sold ?

Name	Form	Name	Form
(1)-----	-----	(4)-----	-----
(2)-----	-----	(5)-----	-----
(3)-----	-----	(6)-----	-----

5. For which of the following purpose(s) do you use contraceptives ?

To contain the no. of children (    ) To avoid fear of pregnancy (    ) for proper spacing in child birth (    ) for health reasons (    )

6. In your present social, economical & environmental conditions do you feel the importance & necessity of contraceptives ?

Yes (    ) No (    )

7. Which of the following conditions is acknowledged in case of using contraceptives ?

Its use does not affect sexual activity (    ) It affects vitality and vigour adversely (    ) Its use affects health (    )

8. (a) At present what types and forms of contraceptives you are using and since when ?

Name of the contraceptive	Period of use
1. -----	-----
2. -----	-----
3. -----	-----

- (b) Have you ever used other contraceptives ?  
 Yes (    )                      No (    )
9. (a) State the reason why you have changed over to the present type and form ?  
 -----
- (b) Do you find any side effects due to the present made of contraceptives ? (Please state the effects)  
 -----
- 10.(a) What attribute of a contraceptive impresses you most.  
 Its colour (    ) fineness (    ) Durability (    )  
 Reliability(    ) Packaging (    ) etc.-----
- (b) Mention the types of contraceptives you know in order of preference.
- |          |          |
|----------|----------|
| 1. ----- | 4. ----- |
| 2. ----- | 5. ----- |
| 3. ----- | 6. ----- |
- 11.(a) Do you use contraceptives regularly in all seasons ?  
 Yes (    )                      No (    )
- (b) In which season do you use it intensely ?  
 Summer (    )                      Winter (    )
12. You are using the present contraceptive because,  
 It is the best (    ) It is economical (    ) It is reliable & convenient (    ) Better types and forms are not available (    )
13. Are all types of contraceptives available near your place of residing ?

Yes (    )

No (    )

14. Who influenced you to use contraceptives ?

(1) No body (    ) (2) Doctor (    ) (3) Friends/relatives (    ) (4) Wife (    ) (5) Govt. propaganda (    )

15.(a) The present campaign by the Government regarding family planning is ?

Effective (    ) Ineffective (    ) More emphatic campaigning should be done (    )

(b) If it is less effective what methods you can suggest for better & vigorous campaigning ?

-----

16.(a) Do you feel at secondary school level the teenagers should be informed about sex education, family planning and use of contraceptive.

Yes (    )

No (    )

17. Rate the following media of Advertising in order of preference among the following, in popularising the use of contraceptives.

News paper/magazines (    ) Radio (    ) Cinema (    )

Television (    ) etc. (State other medias (    )-----

18.(a) Do you feel prices of different types of contraceptives are reasonable ?

Yes (    )

No (    )

(b) If no mention the names of the contraceptives which you think are more costlier

- |          |          |
|----------|----------|
| 1. ----- | 4. ----- |
| 2. ----- | 5. ----- |
| 3. ----- | 6. ----- |

19. You do not use contraceptives because,  
 You fear its side effects ( )  
 You are not convinced of their efficacy ( ) right  
 types of contraceptives are not available ( ) you  
 fear it reduces sexual efficiency ( )

Please give personal information for the following categories for statistical purposes.

- |                     |                                |
|---------------------|--------------------------------|
| 1. Profession ----- | 4. Educational background----- |
| 2. Net Income ----- | 5. Sex -----                   |
| 3. Age -----        | 6. Place of residing -----     |
- urban, rural or semiurban.

#### CLASSIFICATION OF CONTRACEPTIVES

- A. Behavioural contraceptives
- (1) Abstinence. (avoiding sex)
  - (2) Coitus interruptus. (ejaculation of semen outside the organ of female partner)
  - (3) Safe periods



B. Chemical contraceptives

- (1) Foam tablets.
- (2) Jellies & Pastes.

C. Mechanical contraceptives

- (1) Condoms. (nirodh etc.)
- (2) Diaphragm & cervical caps.
- (3) Intrauterine devices. (Loops etc.)

D. Oral contraceptives

- (1) Combined pill.
- (2) Sequential pill.
- (3) Micropill.
- (4) Male pill.
- (5) Injections.

E. Perma-nent contraceptives

- (1) Vasectomy. (Male sterilization)
- (2) Tubectomy. (Female sterilization)

---